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Abstract 492

TITLE: HIV Seroprevalence in Persons Attending a New York City Soup Kitchen, 1998-99

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OBJECTIVE: To measure HIV seroprevalence in persons participating in a screening and social services program offered by the NYCDOH to clients of a soup kitchen.

SETTING: The *Bridge to Respect* (BTR) provides HIV counseling and testing (HIV CT); Hepatitis B (HBV), syphilis and tuberculosis (TB) screening; needs assessment; and case management to adults attending a soup kitchen housed in a church in the Bushwick section of Brooklyn, NY.

METHOD: Linked serosurvey using demographic, social, medical history and risk exposure data collected on the program intake instrument.

MAIN OUTCOME MEASURE: Serologic evidence of antibody to HIV-l by enzyme immunoessay with confirmatory Western Blot.

RESULTS: Between June 1998 and January 1999, 156 persons completed program intake; serologic results for HIV were available for 127. The sample was 43% female, 83% black, 93% U.S.-born, and 75% unemployed. Median/mean age was 40 (SD = 9, range = 20-62). More than 50% were unstably domiciled, with 28% living in shelters or on the street. Despite soup kitchen attendance and receipt of food stamps by 57%, 40% reported not having had enough food on at least 1 day during the past month. Sixty-six percent had ever been in jail; 24% were arrested in the past 90 days, 43% reported history (hx) of STD, 9% hx of TB, 27% hx of mental health treatment, 65% hx of drug treatment, 23% hx of drug injection, 7% urrent injection, 57% crack use, and 11% use in a crackhouse. Nineteen percent were RPR+, and 48% were HBV Ab+. Eleven percent (22% of women and 4% of men, p < 0.05) received money or drugs for sex; 20% (34% of women and 9% of men, p < 0.01) had a history of rape or sexual molestation. The overall HIV seroprevalence was 14% (18/127). Seroprevalence was 24% (12/51) in women vs. 8% (6/76) in men (OR = 3.6, 95%CI = 1.2,10.3), 24% (14/59) in HBV Ab+ vs. 6% (4/64) in HBV Ab- clients (OR = 4.7, 95%CI = 1.4,15.1), 22% (12/55) in STD Hx+ and 8% (6/72) in STD Hx-clients (OR = 3.1, 95%CI = 1.1,8.8). Seroprevalence was significantly higher in HBV Ab+ (36%) than HBV Ab- (10%) women (OR = 5.2, 95%CI = 1.1,27.6). There were no significant differences in seroprevalence within or across gender on the social or behavioral risk indicators. On logistic regression analysis the significant predictors of HIV infection were female sex (OR = 3.7, 95% CI = 2.2,6.6) and HBV Ab+ (OR = 3.3, 95% CI = 1.8,6.2).

CONCLUSION: BTR clients are at risk for HIV by social indicators, serologic markers, and behavioral exposures. Points of contact with the health care or social service system should be used to offer HIV CT and risk reduction, assistance with partner notification, and referrals for social services and medical and mental health care.

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